

FORT RUCKER DIVISION
PERSONNEL STATUS CHANGE REQUEST
03/15/05 10:07

NAME: HOUSTON SAMUEL P EMPLOYEE NUMBER: 014332

EFFECTIVE DATE: 03/14/05 LOCATION: INACTIVE DEPT-DONNE HIREDATE: 02/25/02
THRU:DEPARTMENT: 40-INACTIVE EMPLOYEES-EXTENDED ILLNESS DIRECT
CLASSIFICATION: 01A-AIRCRAFT MECHANIC

RECLASSIFICATION:

FROM -

TO -

TRANSFER:

FROM -

TO -

VAC PREV APPROVED: REST. DUTY:

PREV SHIFT START :

SHIFT CHANGE: FROM TO

PROBATIONARY EMPLOYEE: (REFERENCE CBA OVERTIME PROVISIONS)

OT PROJECT TRANSFER - HOURS TRANSFERRED: 0.0 FROM: TO:

CURRENT HOME PHONE: (850) 682-6482

HOURS = 0.0

TERMINATION: S LAST DAY WORKED:

REASON FOR CHANGE: 9 INVOLUNTARY TERMINATION

APPROVED:

SUPERVISOR

APPROVED:

DEPARTMENT HEAD

***** CLEARANCE RECORD *****

THIS SECTION MUST BE COMPLETED PRIOR TO TERMINATION OR TRANSFER OF AN
EMPLOYEE FROM ONE DEPT. OR AREA TO ANOTHER. TRANSFERRING EMPLOYEE MUST
PRESENT A COPY OF THIS FORM TO GAINING ACTIVITY1. DEPARTMENT
SUPPLY
TOOL CRIB
INSPECTOR STAMP
KEYS/EQUIPMENT
PUBLICATIONS
FLIGHT CLOTHING2. PERSONNEL: DB
ID BADGE DB
OPERATOR PERMITS DB
AUTHORIZATIONS N/A
SECURITY/TAP
JOB BOOK
JOB PLAN

3. CHARGES:

REMARKS

DATE: 3/15/05

EMPLOYEE SIGNATURE:

DISTRIBUTION:

FILE

BYEE

G ACTIVITY

TERMINATION ONLY

03/15/05
FILED 01/1